

## B1 (Official Form 1) (04/13)

United States Bankruptcy Court Southern District of California						Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Pratchard, Joshua Joel				Name of Joint Debtor (Spouse) (Last, First, Middle): Pratchard, Melissa-Rae Annette			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): None				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): fka Melissa Goad			
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 5938				Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 6938			
Street Address of Debtor (No. and Street, City, and State) 4818 Ingraham Street San Diego, CA				Street Address of Joint Debtor (No. and Street, City, and State) 4818 Ingraham Street San Diego, CA			
ZIPCODE 92109				ZIPCODE 92109			
County of Residence or of the Principal Place of Business: San Diego				County of Residence or of the Principal Place of Business: San Diego			
Mailing Address of Debtor (if different from street address):				Mailing Address of Joint Debtor (if different from street address):			
ZIPCODE				ZIPCODE			
Location of Principal Assets of Business Debtor (if different from street address above):						ZIPCODE	
<b>Type of Debtor</b> (Form of Organization) (Check <b>one</b> box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		<b>Nature of Business</b> (Check <b>one</b> box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input checked="" type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other N.A.		<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding			
<b>Chapter 15 Debtors</b>  Country of debtor's center of main interests: _____  Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____		<b>Tax-Exempt Entity</b> (Check box, if applicable)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)		<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. §101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.			
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				<b>Chapter 11 Debtors</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment  on 4/01/16 and every three years thereafter</i> ). ----- <b>Check all applicable boxes</b> <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).			
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						THIS SPACE IS FOR COURT USE ONLY	
<b>Estimated Number of Creditors</b> <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000							
<b>Estimated Assets</b> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion							
<b>Estimated Liabilities</b> <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion							

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Joshua Joel Pratchard &amp; Melissa-Rae Annette Pratchard</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:	
Location Where Filed: <b>N.A.</b>	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).  <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> <u>/s/ Richard E. Chang</u>                          Signature of Attorney for Debtor(s)                     </div> <div> <u>05/11/2015</u>                          Date                     </div> </div>	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?  <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)  <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes)  <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <div style="text-align: center;">                         _____                          (Name of landlord that obtained judgment)                     </div> <div style="text-align: center;">                         _____                          (Address of landlord)                     </div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).			

**B1 (Official Form 1) (04/13)****Page 3****Voluntary Petition***(This page must be completed and filed in every case)*

Name of Debtor(s):

Joshua Joel Pratchard &amp; Melissa-Rae Annette Pratchard

**Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Joshua Joel Pratchard

Signature of Debtor

**X** /s/ Melissa-Rae Annette Pratchard

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

05/11/2015

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are attached.



Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

**Signature of Attorney\*****X** /s/ Richard E. Chang

Signature of Attorney for Debtor(s)

**RICHARD E. CHANG 195060**

Printed Name of Attorney for Debtor(s)

**Chang and Diamond**

Firm Name

**624 Broadway, Suite 406**

Address

**San Diego, CA 92101****(619)233-6300**

Telephone Number

05/11/2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.*

B1 D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT**  
**Southern District of California**

Joshua Joel Pratchard & Melissa-Rae  
 Annette Pratchard

In re \_\_\_\_\_  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
 CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Joshua Joel Pratchard  
JOSHUA JOEL PRATCHARD

05/11/2015

Date: \_\_\_\_\_

B1 D (Official Form 1, Exhibit D) (12/09)

**UNITED STATES BANKRUPTCY COURT**  
**Southern District of California**

Joshua Joel Pratchard & Melissa-Rae  
 Annette Pratchard

In re \_\_\_\_\_  
 Debtor(s)

Case No. \_\_\_\_\_  
 (if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
 CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Joint Debtor: /s/ Melissa-Rae Annette Pratchard  
MELISSA-RAE ANNETTE PRATCHARD

Date: 05/11/2015



**B6 Cover (Form 6 Cover) (12/07)**

**FORM 6. SCHEDULES**

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

**GENERAL INSTRUCTIONS:** The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.



In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
Total			0	

(Report also on Summary of Schedules.)

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard

Case No. \_\_\_\_\_

Debtor

(If known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Misc. used household furniture. No individual item is valued at over \$400.	J	2,600
5. Books, Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Personal used clothing	J	1,800
7. Furs and jewelry.		Wedding rings, wedding band and diamond earrings	J	7,200
8. Firearms and sports, photographic, and other hobby equipment.		paddle boards	J	1,200
		HK P2000 .40 S&W	W	900
		Misc. camping gear	J	1,000
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term Life insurance - no cash surrender value	H	0
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		IRA	W	50

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		21 shares starbucks	W	2,000
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.		Personal Injury claim - soft tissue represented by Brian Dougherty @ Hiden, Rott & Oertle (619)206-1046 bdougherty@hrollp.com	H	3,000
		Personal Injury Claim - soft tissue represented by Brian Dougherty @ Hiden, Rott & Oertle (619)206-1046 bdougherty@hrollp.com	W	3,000
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard Case No. \_\_\_\_\_  
Debtor (If known)

SCHEDULE B - PERSONAL PROPERTY  
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2008 VW Jetta Toyota Financial - 2013 Toyota Camry - lease	W W	5,875 17,525
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.		dog	J	0
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		2 round trip tickets to Hawaii and Air BNB stay	J	2,400
0 continuation sheets attached Total				\$ 48,550

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard

Case No. \_\_\_\_\_

Debtor

(If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. § 522(b)(2)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675\*.

☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Personal used clothing	C.C.P. 703.140(b)(3)	1,800	1,800
IRA	C.C.P. 703.140(b)(10)(E)	50	50
Misc. used household furniture. No individual item is valued at over \$400.	C.C.P. 703.140(b)(3)	2,600	2,600
Wedding rings, wedding band and diamond earrings	C.C.P. 703.140(b)(4) C.C.P. 703.140(b)(5)	1,525 5,675	7,200
Term Life insurance - no cash surrender value	C.C.P. 703.140(b)(7)	0	0
2008 VW Jetta	C.C.P. 703.140(b)(2) C.C.P. 703.140(b)(5)	5,100 775	5,875
21 shares starbucks	C.C.P. 703.140(b)(5)	2,000	2,000
2 round trip tickets to Hawaii and Air BNB stay	C.C.P. 703.140(b)(5)	2,400	2,400
Personal Injury claim - soft tissue	C.C.P. 703.140(b)(11)(D)	3,000	3,000
Personal Injury Claim - soft tissue	C.C.P. 703.140(b)(11)(D)	3,000	3,000
paddle boards	C.C.P. 703.140(b)(5)	1,200	1,200
HK P2000 .40 S&W	C.C.P. 703.140(b)(5)	900	900
Misc. camping gear	C.C.P. 703.140(b)(5)	1,000	1,000

\*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**B6D (Official Form 6D) (12/07)**In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard,

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 107128		Incurred: 4/2013 Lien: Leased Vehicle Security: Toyota Financial - 2013 Toyota Camry - lease				17,525	0
Toyota Financial Services Box 790069 St. Louis, MO 63179-0069		VALUE \$ 17,525					
ACCOUNT NO.							
		VALUE \$					
ACCOUNT NO.							
		VALUE \$					
0 continuation sheets attached		Subtotal > (Total of this page)				\$ 17,525	\$ 0
		Total > (Use only on last page)				\$ 17,525	\$ 0

(Report also on  
Summary of Schedules)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

**B6E (Official Form 6E) (04/13)**In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard,  
DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☒ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

*\*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.*



**B6E (Official Form 6E) (04/13) - Cont.**In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard,  
DebtorCase No. \_\_\_\_\_  
(if known)☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

## B6E (Official Form 6E) (04/13) - Cont.

In re Joshua Joel Pratchard &amp; Melissa-Rae Annette Pratchard

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

(Continuation Sheet) Sec. 507(a)(1)

## Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.								
Emily Funk 5118 W Swayback Pass Phoenix, AZ 85310	H	Incurred: 2015 Consideration: child support				14,228	0	14,228
ACCOUNT NO.								
Internal Revenue Service Box 105416 Atlanta, GA 30348-5416		Incurred: 2006-2013 Consideration: Tax Debt				35,606	1,673	33,933
ACCOUNT NO.								
San Diego District Attorney Family Support Division 330 West Broadway San Diego, CA 92101-3825		Incurred: 2015 Consideration: child support representing Emily Funk				Notice Only	Notice Only	Notice Only
ACCOUNT NO.								

Sheet no. 1 of 1 continuation sheets attached to Schedule of  
Creditors Holding Priority ClaimsSubtotal >  
(Totals of this page)

\$ 49,834 \$ 1,673 \$ 48,161

(Use only on last page of the completed  
Schedule E.) Report also on the Summary  
of Schedules

Total &gt;

\$ 49,834

(Use only on last page of the completed  
Schedule E. If applicable, report also on  
the Statistical Summary of Certain  
Liabilities and Related Data.)

Totals &gt;

\$ 1,673 \$ 48,161

## B6F (Official Form 6F) (12/07)

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Allied Interstate Box 1954 Southgate, MI 48195-0954		Incurred: 2015 Consideration: Notice Only representin US Bank				Notice Only
ACCOUNT NO. American Coradius International, LLC 2420 Sweet Home Road, Ste. 150 Amherst, NY 14228-2244		Incurred: 2015 Consideration: Notice Only representing Paypal				Notice Only
ACCOUNT NO. American Express Box 0001 Los Angeles, CA 90096-8000		Incurred: 2011-15 Consideration: Credit Card Debt (Unsecured)				1,300
ACCOUNT NO. a987057 Anesthesia Service Medical Group Box 85004 San Diego, CA 92186-5004		Incurred: 2014 Consideration: Medical Services				109
Subtotal >						\$ 1,409
Total >						\$

15 continuation sheets attached

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 414734099948 Bank of America Box 17054 Wilmington, DE 19850		Incurred: 2012-15 Consideration: Credit Card Debt (Unsecured)				5,503
ACCOUNT NO. Bank of America Box 17054 Wilmington, DE 19850		Incurred: 2013 Consideration: NSF Checks				90
ACCOUNT NO. Bay Imaging Consultants c/o FCB 757 L Street Fresno, CA 93721		Incurred: 2011 Consideration: Medical Services				107
ACCOUNT NO. 702127039059 Best Buy/HSBC Box 60148 City of Industry, CA 91716-0148		Incurred: 2011-15 Consideration: Credit Card Debt (Unsecured)				1,805
ACCOUNT NO. 442868040029 Boeing Employees Credit Union Box 97050 Seattle, WA 98124		Incurred: 2011-14 Consideration: Collection on Account				6,200

Sheet no. 1 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 13,705

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 356925 Boeing Employees Credit Union Box 97050 Seattle, WA 98124		Incurred: 2014 Consideration: Collection on Account				500
ACCOUNT NO. California Business Bureau 4542 Ruffner St., #160 San Diego, CA 92111		Incurred: 2015 Consideration: Notice Only representing Scrippshealth La Jolla				Notice Only
ACCOUNT NO. California Emergency Phys c/o SCC 914 14th St. Modesto, CA 95354		Incurred: 2009 Consideration: Medical Services				356
ACCOUNT NO. Capital Management Services, LP 726 Exchange Street, #700 Buffalo, NY 14210		Incurred: 2015 Consideration: Notice Only representing US Bank				Notice Only
ACCOUNT NO. Capital One Box 30281 Salt Lake City, UT 84130		Incurred: 2011-14 Consideration: Credit Card Debt (Unsecured)				300

Sheet no. 2 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 1,156

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Chase Box 15298 Wilmington, DE 19850		Incurred: 2011-13 Consideration: Credit Card Debt (Unsecured)				1,900
ACCOUNT NO. Chex Systems, Inc. 7805 Hudson Road, Suite 100 Woodbury, MN 55125		Incurred: 2015 Consideration: Notice Only				Notice Only
ACCOUNT NO. 446 City of San Diego 1010 2nd Ave., #666 San Diego, CA 92101		Incurred: 2015 Consideration: Collection on Account				515
ACCOUNT NO. City of San Diego 1010 2nd Ave., #666 San Diego, CA 92101		Incurred: 2014 Consideration: parking ticket				453
ACCOUNT NO. multiple accounts CMRE Financial Services 3075 E. Imperial Hwy, Suite 200 Brea, CA 92821		Incurred: 2015 Consideration: Notice Only representing Emergency Services Medical Corp.				Notice Only

Sheet no. 3 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 2,868

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Comcast Cable Box 34227 Seattle, WA 98124-1227		Incurred: 2009 Consideration: Collection on Account				392
ACCOUNT NO. Credit Management 4200 International Parkway Carrollton, TX 75007-1912		Incurred: 2015 Consideration: Notice Only representing Time Warner				Notice Only
ACCOUNT NO. Cyrus Torchinsky, MD PhD 4060 4th Ave, Ste. 410 San Diego, CA 92103-2121		Incurred: 2014 Consideration: Medical Services				351
ACCOUNT NO. David M. Kupfer, MD 5395 Ruffin Rd., #201 San Diego, CA 92123		Incurred: 2013-14 Consideration: Medical Services				50,000
ACCOUNT NO. PTY9839 Derek Sanders 770 California St., #401 San Francisco, CA 94108-2424		Incurred: 2010 Consideration: restitution				14,091

Sheet no. 4 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 64,834

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)



## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Dr, Behzad Aalaei 444 W. C Street, Ste. 444 San Diego, CA 92101		Incurred: 2015 Consideration: Medical Services				500
ACCOUNT NO. Dr. Michael Huguet c/o TPS Box 1270 Los Alamitos, CA 90720		Incurred: 2012 Consideration: Medical Services				758
ACCOUNT NO. Dr. Ryan Curda 4747 Mission Blvd., Ste. 1 San Diego, CA 92109		Incurred: 2015 Consideration: Medical Services				1,350
ACCOUNT NO. t710eah1900031921289 Emergency Services Medical Corp. Box 503330 San Diego, CA 92150-3330		Incurred: 2014 Consideration: Medical Services				435
ACCOUNT NO. 400065829 Emergency Services Medical Corp. Box 503330 San Diego, CA 92150-3330		Incurred: 2014 Consideration: Medical Services				26

Sheet no. 5 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 3,069

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. multiple accounts Emergency Services Medical Corp. Box 503330 San Diego, CA 92150-3330		Incurred: 2014 Consideration: Medical Services				1,100
ACCOUNT NO. ER Services Medical Group c/o Roadrunner Box 9022 La Jolla, CA 92038		Incurred: 2008 Consideration: Medical Services				58
ACCOUNT NO. Eric Beasley 301 Bicentennial Circle Sacramento, CA 95826		Incurred: 2013 Consideration: Collection on Account				3,870
ACCOUNT NO. FMA Alliance 12339 Cutten Road Houstin, TX 77066		Incurred: 2015 Consideration: Notice Only representing US Bank				Notice Only
ACCOUNT NO. Grant & Weber 26575 West Agoura Road Calabasas, CA 91302		Incurred: 2015 Consideration: Notice Only representing La Jolla Emergency Spec.				Notice Only
Subtotal >						\$ 5,028
Total >						\$

Sheet no. 6 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 180417 Grossmont Anesthesia Services Box 997 La Mesa, CA 91944-0997		Incurred: 2014 Consideration: Medical Services				1,275
ACCOUNT NO. Healing Arts Wellness Center 1001 Garnet Ave, #220 San Diego, CA 92109		Incurred: 2014 Consideration: Medical Services				1,450
ACCOUNT NO. HSBC Box 3425 Buffalo, NY 14240		Incurred: 2015 Consideration: Notice Only				Notice Only
ACCOUNT NO. I.C. System, Inc. Box 64887 St. Paul, MN 55164-0887		Incurred: 2015 Consideration: Notice Only representing Paypal				Notice Only
ACCOUNT NO. 15532 James Bush, M.D. 3805 Front Street San Diego, CA 92103		Incurred: 2014 Consideration: Medical Services				20

Sheet no. 7 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 2,745

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Jason & Nichole Cristili 6703 Camino Del Prado Carlsbad, CA 92011		Incurred: 2015 Consideration: Collection on Account				800
ACCOUNT NO. 314736 Kay Jewelers Box 740425 Cincinnati, OH 45274-0425		Incurred: 2013-14 Consideration: Credit Card Debt (Unsecured)				3,558
ACCOUNT NO. 20613404201 La Jolla Emergency Physicians Medical Gr PO Box 66168 Arcadia, CA 91066-1687		Incurred: 2012 Consideration: Medical Services				515
ACCOUNT NO. 102050790 La Jolla Emergency Specialists PO Box 660997 Arcadia, CA 91066-0997		Incurred: 2014 Consideration: Medical Services				120
ACCOUNT NO. 76502434 LabCorp PO Box 2240 Burlington, NC 27216-2240		Incurred: 2014 Consideration: Medical Services				8

Sheet no. 8 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 5,001

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 98008265 LabCorp PO Box 2240 Burlington, NC 27216-2240		Incurred: 2014 Consideration: Medical Services				15
ACCOUNT NO. LCA Collections PO Box 2240 Burlington, NC 27216-2240		Incurred: 2015 Consideration: Notice Only				Notice Only
ACCOUNT NO. 20120307029648 Lincoln Financial Group 8801 Indian Hills Drive Omaha, NE 68114-4066		Incurred: 2012 Consideration: Medical Services				114
ACCOUNT NO. 440966163 Macy's Box 8218 Mason, OH 45040		Incurred: 2013-14 Consideration: Credit Card Debt (Unsecured)				1,200
ACCOUNT NO. Mechanics Bank c/o SAR 12209 Champlin Dr., #102 Champlin, MN 55316		Incurred: 2012 Consideration: Credit Card Debt (Unsecured)			X	565

Sheet no. 9 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 1,894

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 81713 Miur Ortho c/o Joben Enterprises 2405 Shadelands Dr. Walnut Creek, CA 94598		Incurred: 2014 Consideration: Medical Services				350
ACCOUNT NO. 26380049 Monarch Recovery Management 10965 Decatur Road Philadelphia, PA 19154		Incurred: 2014 Consideration: Collection on Account				341
ACCOUNT NO. Neuroscan c/o FCB 757 L Street Fresno, CA 93721		Incurred: 2010 Consideration: Medical Services				1,754
ACCOUNT NO. 822165 Nordstrom Bank Box 13589 Scottsdale, AZ 82567		Incurred: 2013-15 Consideration: Credit Card Debt (Unsecured)				1,100
ACCOUNT NO. Northstar Location Services, LLC 4285 Genesee St. Cheektowaga, NY 14225-1943		Incurred: 2015 Consideration: Notice Only representing Bank of America				Notice Only

Sheet no. 10 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 3,545

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 17936 Novak Medical Group 4440 Lamont St. San Diego, CA 92109-4560		Incurred: 2014 Consideration: Medical Services				15
ACCOUNT NO. 141484504600 Ocean Physical Therapy 4501 Mission Bay Drive, Ste. 3K San Diego, CA 92109		Incurred: 2014 Consideration: Medical Services				15
ACCOUNT NO. 5049906062511977 Paypal 2211 N 1st St. San Jose, CA 95131		Incurred: 2012-14 Consideration: Credit Card Debt (Unsecured)				4,200
ACCOUNT NO. PG E Energy c/o CBE Group Box 900 Waterloo, IA 50704		Incurred: 2014 Consideration: Utilities				186
ACCOUNT NO. Portfolio Recovery Associates 120 Corporate Blvd., #100 Norfolk, VA 23502		Incurred: 2015 Consideration: Notice Only representing Capital One				Notice Only

Sheet no. 11 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 4,416

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)



## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 168372 Radiology Medical Group PO Box 2524 Indianapolis, IN 46206		Incurred: 2015 Consideration: Medical Services				60
ACCOUNT NO. 168372qrmgi Radiology Medical Group, Inc. PO Box 2524 Indianapolis, IN 46206		Incurred: 2014 Consideration: Medical Services				9
ACCOUNT NO. multiple accounts San Diego Imaging Medical Group Box 23540 San Diego, CA 92193-3540		Incurred: 2014 Consideration: Medical Services				1,200
ACCOUNT NO. 439480657 San Diego Pathologists Medical Group Box 744127 Dallas, TX 75371-4127		Incurred: 2014 Consideration: Medical Services				15
ACCOUNT NO. Scripps 10150 Sorrento Valley Road, #200 San Diego, CA 92121		Incurred: 2014 Consideration: Medical Services				575

Sheet no. 12 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 1,859

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 701348740 Scripps 10150 Sorrento Valley Road, #200 San Diego, CA 92121		Incurred: 2014 Consideration: Medical Services				14
ACCOUNT NO. multiple accounts Scripps 10150 Sorrento Valley Road, #200 San Diego, CA 92121		Incurred: 2014 Consideration: Medical Services				150
ACCOUNT NO. 1020507901 Scripps 10150 Sorrento Valley Road, #200 San Diego, CA 92121		Incurred: 2014 Consideration: Medical Services				575
ACCOUNT NO. multiple accounts Scripps 10150 Sorrento Valley Road, #200 San Diego, CA 92121		Incurred: 2015 Consideration: Medical Services				1,900
ACCOUNT NO. Scripps Cardiology Medical Group c/o CAS 323 Van Houten Ave. El Cajon, CA 92020		Incurred: 2013 Consideration: Medical Services				108
Subtotal >						\$ 2,747
Total >						\$

Sheet no. 13 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. Sharp Memorial Hospital 7901 Frost Street San Diego, CA 92123		Incurred: 2014 Consideration: Medical Services				2,000	
ACCOUNT NO. Social Security Administration Box 2000 Richmond, CA 94802-1791		Incurred: 2014 Consideration: Collection on Account				1,488	
ACCOUNT NO. Stellar Recovery, Inc. 1327 Highway 2 West, Suite 100 Kalispell, MT 59901.		Incurred: 2015 Consideration: Notice Only representing Comcast				Notice Only	
ACCOUNT NO. Time Warner Cable Box 60074 Cty of Industry, CA 9171-0074		Incurred: 2014 Consideration: Collection on Account				44	
ACCOUNT NO. Uber c/o Rasier, LLC, 182 Howard Street San Francisco, CA 94105		Incurred: 2014 Consideration: Collection on Account				1,000	
Sheet no. <u>14</u> of <u>15</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal >	\$ 4,532
						Total >	\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
DebtorCase No. \_\_\_\_\_  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. multiple accounts US Bank Box 790179 St. Louis, MO 63179-0179		Incurred: 2013-15 Consideration: Credit Card Debt (Unsecured)				2,800
ACCOUNT NO. US Bank Box 790179 St. Louis, MO 63179-0179		Incurred: 2014 Consideration: NSF Checks				500
ACCOUNT NO. US Department of Education Box 5609 Greenville, TX 75403		Incurred: 9/2005 Consideration: student loan				1,299
ACCOUNT NO.						
ACCOUNT NO.						
Subtotal >						\$ 4,599
Total >						\$ 123,407

Sheet no. 15 of 15 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard

Case No. \_\_\_\_\_

Debtor

(if known)

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Toyota Financial Services Box 790069 St. Louis, MO 63179-0069	2013 Toyota Camry

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard

Debtor

Case No. \_\_\_\_\_

(if known)

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

**Fill in this information to identify your case:**

Debtor 1 Joshua Joel Pratchard  
First Name Middle Name Last Name

Debtor 2 Melissa-Rae Annette Pratchard  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of CA

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

☐ Employed  
☒ Not employed

**Occupation**

unemployed

**Employer's name****Employer's address**

Number Street

City State ZIP Code

How long employed there? \_\_\_\_\_

**Debtor 2 or non-filing spouse**

☐ Employed  
☒ Not employed

student/unemployed

Number Street

City State ZIP Code

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0

\$ 0

**3. Estimate and list monthly overtime pay.**

3. + \$ 0

+ \$ 0

**4. Calculate gross income.** Add line 2 + line 3.

4. \$ 0

\$ 0



Joshua Joel Pratchard

Debtor 1

First Name Middle Name Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ..... → 4.	\$ 0	\$ 0
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0	\$ 0
5b. Mandatory contributions for retirement plans	5b. \$ 0	\$ 0
5c. Voluntary contributions for retirement plans	5c. \$ 0	\$ 0
5d. Required repayments of retirement fund loans	5d. \$ 0	\$ 0
5e. Insurance	5e. \$ 0	\$ 0
5f. Domestic support obligations	5f. \$ 0	\$ 0
5g. Union dues	5g. \$ 0	\$ 0
5h. Other deductions. Specify: ;	5h. + \$ 0	+ \$ 0
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0	\$ 0
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0	\$ 0
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0	\$ 0
8b. Interest and dividends	8b. \$ 0	\$ 0
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0	\$ 0
8d. Unemployment compensation	8d. \$ 0	\$ 0
8e. Social Security	8e. \$ 0	\$ 0
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: food stamps;	8f. \$ 357	\$ 0
8g. Pension or retirement income	8g. \$ 0	\$ 0
8h. Other monthly income. Specify: unemployment compensation;	8h. + \$ 1,956	+ \$ 0
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 2,313	\$ 0
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,313	\$ 0
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	11. + \$ 0	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 2,313	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: Debtor has applied for unemployment compensation. Schedule I lists projected benefits.		

**Fill in this information to identify your case:**

Debtor 1 Joshua Joel Pratchard  
First Name Middle Name Last Name

Debtor 2 Melissa-Rae Annette Pratchard  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of CA

Case number \_\_\_\_\_  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

**Official Form B 6J****Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ No☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

☒ No

☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

**4. The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 1,150

**If not included in line 4:**

4a. Real estate taxes

4a. \$ 0

4b. Property, homeowner's, or renter's insurance

4b. \$ 0

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0

4d. Homeowner's association or condominium dues

4d. \$ 0

Debtor 1 Joshua Joel Pratchard  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

		Your expenses	
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	\$ <u>0</u>
6.	<b>Utilities:</b>		
6a.	Electricity, heat, natural gas	6a.	\$ <u>40</u>
6b.	Water, sewer, garbage collection	6b.	\$ <u>0</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ <u>150</u>
6d.	Other. Specify: <u>cellular phones</u>	6d.	\$ <u>150</u>
7.	<b>Food and housekeeping supplies</b>	7.	\$ <u>500</u>
8.	<b>Childcare and children's education costs</b>	8.	\$ <u>0</u>
9.	<b>Clothing, laundry, and dry cleaning</b>	9.	\$ <u>50</u>
10.	<b>Personal care products and services</b>	10.	\$ <u>50</u>
11.	<b>Medical and dental expenses</b>	11.	\$ <u>50</u>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ <u>300</u>
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	\$ <u>0</u>
14.	<b>Charitable contributions and religious donations</b>	14.	\$ <u>0</u>
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	\$ <u>0</u>
15b.	Health insurance	15b.	\$ <u>322</u>
15c.	Vehicle insurance	15c.	\$ <u>145</u>
15d.	Other insurance. Specify: _____	15d.	\$ <u>0</u>
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$ <u>0</u>
17.	<b>Installment or lease payments:</b>		
17a.	Car payments for Vehicle 1	17a.	\$ <u>328</u>
17b.	Car payments for Vehicle 2	17b.	\$ <u>0</u>
17c.	Other. Specify: _____	17c.	\$ <u>0</u>
17d.	Other. Specify: _____	17d.	\$ <u>0</u>
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).</b>	18.	\$ <u>500</u>
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	\$ <u>0</u>
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a.	Mortgages on other property	20a.	\$ <u>0</u>
20b.	Real estate taxes	20b.	\$ <u>0</u>
20c.	Property, homeowner's, or renter's insurance	20c.	\$ <u>0</u>
20d.	Maintenance, repair, and upkeep expenses	20d.	\$ <u>0</u>
20e.	Homeowner's association or condominium dues	20e.	\$ <u>0</u>

Debtor 1 Joshua Joel Pratchard  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

21. **Other.** Specify: \_\_\_\_\_

21. **+\$** 0

22. **Your monthly expenses.** Add lines 4 through 21.  
 The result is your monthly expenses.

22. **\$** 3,735

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. **\$** 2,313

23b. Copy your monthly expenses from line 22 above.

23b. **-\$** 3,735

23c. Subtract your monthly expenses from your monthly income.  
 The result is your *monthly net income*.

23c. **\$** -1,422

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

**B6 Summary (Official Form 6 - Summary) (12/14)**

# United States Bankruptcy Court

## Southern District of California

Joshua Joel Pratchard & Melissa-Rae Annette Pratchard

In re \_\_\_\_\_  
Debtor

Case No. \_\_\_\_\_

Chapter 7

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

#### AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 0		
B – Personal Property	YES	3	\$ 48,550		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 17,525	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 49,834	
F - Creditors Holding Unsecured Nonpriority Claims	YES	16		\$ 123,407	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 2,313
J - Current Expenditures of Individual Debtors(s)	YES	3			\$ 3,735
<b>TOTAL</b>		32	\$ 48,550	\$ 190,766	

# United States Bankruptcy Court

## Southern District of California

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard

Case No. \_\_\_\_\_

Debtor

Chapter 7

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 49,834
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0
Student Loan Obligations (from Schedule F)	\$ 1,299
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0
TOTAL	\$ 51,133

#### State the Following:

Average Income (from Schedule I, Line 12)	\$ 2,313
Average Expenses (from Schedule J, Line 22)	\$ 3,735
Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1 Line 14)	\$ 807

#### State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 1,673	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 48,161
4. Total from Schedule F		\$ 123,407
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 171,568

**B6 (Official Form 6 - Declaration) (12/07)**

Joshua Joel Pratchard &amp; Melissa-Rae Annette Pratchard

In re

Debtor

Case No.

(If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 34 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 05/11/2015Signature: /s/ Joshua Joel Pratchard

Debtor

Date 05/11/2015Signature: /s/ Melissa-Rae Annette Pratchard

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,  
of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date

Signature:

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT  
Southern District of California

In Re Joshua Joel Pratchard & Melissa-Rae Annette  
Pratchard

Case No. \_\_\_\_\_  
(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None  
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2015(db)	2700	Layfield USA
2014(db)	0	zero net family income
2013(db)	0	zero net family income
2015(jdb)		
2014(jdb)		
2013(jdb)		



**2. Income other than from employment or operation of business**

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

2015 (db) 1785 food stamps  
(db)

**3. Payments to creditors**

None

☐

Complete a. or b., as appropriate, and c.

*a. Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Toyota Financial Services Box 790069 St. Louis, MO 63179-0069	monthly	\$328.90 per month	17,525

None

☒

*b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*\*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.*

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None



*c. All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR  
AND RELATIONSHIP TO DEBTOR

DATES OF  
PAYMENTS

AMOUNT PAID

AMOUNT STILL  
OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT  
AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR  
AGENCY AND LOCATION

STATUS OR  
DISPOSITION

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF  
PERSON FOR WHOSE BENEFIT  
PROPERTY WAS SEIZED

DATE OF  
SEIZURE

DESCRIPTION AND  
VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND  
ADDRESS OF  
CREDITOR OR SELLER

DATE OF REPOSESSION,  
FORECLOSURE SALE,  
TRANSFER OR RETURN

DESCRIPTION AND  
VALUE OF PROPERTY

**6. Assignments and Receiverships**

None



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND  
ADDRESS OF  
ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF  
ASSIGNMENT  
OR SETTLEMENT

None



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND  
ADDRESS OF  
CUSTODIAN

NAME AND LOCATION  
OF COURT CASE TITLE  
& NUMBER

DATE OF  
ORDER

DESCRIPTION AND  
VALUE OF PROPERTY

**7. Gifts**

None



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND  
ADDRESS OF  
PERSON OR ORGANIZATION

RELATIONSHIP  
TO DEBTOR, IF ANY

DATE OF  
GIFT

DESCRIPTION AND  
VALUE OF GIFT

**8. Losses**

None



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION  
AND VALUE  
OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS  
WAS COVERED IN WHOLE OR IN PART BY  
INSURANCE, GIVE PARTICULARS

DATE OF  
LOSS

**9. Payments related to debt counseling or bankruptcy**

None

☐

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Richard Chang Chang and Diamond 624 Broadway, #406 San Diego, CA 92101	5/2015	\$1200

**10. Other transfers**

None

☒

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

☒

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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**11. Closed financial accounts**

None

☒

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------------	--	--

**12. Safe deposit boxes**

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
------------------------------	--------------------------------------	----------------------

**15. Prior address of debtor**

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
3976 Morrell Street, Apt 3 San Diego, CA 92109	same	7/2011 to 8/2013

**16. Spouses and Former Spouses**

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Sites**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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**18. Nature, location and name of business**

None



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME	ADDRESS
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**[Questions 19 - 25 are not applicable to this case]**

\* \* \* \* \*

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	<u>05/11/2015</u>	Signature of Debtor	<u>/s/ Joshua Joel Pratchard</u> JOSHUA JOEL PRATCHARD
Date	<u>05/11/2015</u>	Signature of Joint Debtor	<u>/s/ Melissa-Rae Annette Pratchard</u> MELISSA-RAE ANNETTE PRATCHARD

0 continuation sheets attached

***Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571***

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**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

\_\_\_\_\_  
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social Security No. (Required by 11 U.S.C. § 110(c).)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.*

\_\_\_\_\_

\_\_\_\_\_  
Address

X \_\_\_\_\_

Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

***A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.***



B8 (Official Form 8) (12/08)

# UNITED STATES BANKRUPTCY COURT

## Southern District of California

Joshua Joel Pratchard &amp; Melissa-Rae Annette Pratchard

In re \_\_\_\_\_, Case No. \_\_\_\_\_  
 Debtor Chapter 7

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A** - Debts secured by property of the estate. *(Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)*

Property No. 1	
<b>Creditor's Name:</b> Toyota Financial Services Box 790069 St. Louis, MO 63179-0069	<b>Describe Property Securing Debt:</b> Toyota Financial - 2013 Toyota Camry - lease
Property will be <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <span><input type="checkbox"/> Surrendered</span> <span><input checked="" type="checkbox"/> Retained</span> </div> If retaining the property, I intend to <i>(check at least one)</i> : <div style="display: flex; justify-content: space-around;"> <span><input type="checkbox"/> Redeem the property</span> <span><input checked="" type="checkbox"/> Reaffirm the debt</span> <span><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)).</span> </div> Property is <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <span><input type="checkbox"/> Claimed as exempt</span> <span><input checked="" type="checkbox"/> Not claimed as exempt</span> </div>	

Property No. 2 <i>(if necessary)</i>	
<b>Creditor's Name:</b>	<b>Describe Property Securing Debt:</b>
Property will be <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <span><input type="checkbox"/> Surrendered</span> <span><input type="checkbox"/> Retained</span> </div> If retaining the property, I intend to <i>(check at least one)</i> : <div style="display: flex; justify-content: space-around;"> <span><input type="checkbox"/> Redeem the property</span> <span><input type="checkbox"/> Reaffirm the debt</span> <span><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)).</span> </div> Property is <i>(check one)</i> : <div style="display: flex; justify-content: space-around;"> <span><input type="checkbox"/> Claimed as exempt</span> <span><input type="checkbox"/> Not claimed as exempt</span> </div>	

**PART B** - Personal property subject to unexpired leases. *(All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)*

Property No. 1		
<b>Lessor's Name:</b> Toyota Financial Services Box 790069 St. Louis, MO 63179-0069	<b>Describe Leased Property:</b> 2013 Toyota Camry	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 <i>(if necessary)</i>		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 <i>(if necessary)</i>		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

0 continuation sheets attached *(if any)*

**I declare under penalty of perjury that the above indicates my intention as to any property of my Estate securing debt and/or personal property subject to an unexpired lease.**

Date: 05/11/2015

/s/ Joshua Joel Pratchard

Signature of Debtor

/s/ Melissa-Rae Annette Pratchard

Signature of Joint Debtor

B 201B (Form 201B) (12/09)

# United States Bankruptcy Court

## Southern District of California

In re Joshua Joel Pratchard & Melissa-Rae Annette Pratchard**Debtor**

Case No. \_\_\_\_\_

**(If known)**

### CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

#### Certification of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

\_\_\_\_\_  
Printed name and title, if any, of Bankruptcy Petition Preparer  
Address:

\_\_\_\_\_  
Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

X

\_\_\_\_\_  
Signature of Bankruptcy Petition Preparer or officer,  
Principal, responsible person, or partner whose Social  
Security number is provided above.

#### Certification of the Debtor

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Joshua Joel Pratchard & Melissa-Rae Annette Pratchard  
Printed Names(s) of Debtor(s)

X /s/ Joshua Joel Pratchard 05/11/2015  
Signature of Debtor Date

Case No. (if known) \_\_\_\_\_

X /s/ Melissa-Rae Annette Pratchard 05/11/2015  
Signature of Joint Debtor, (if any) Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Allied Interstate  
Box 1954  
Southgate, MI 48195-0954

American Coradius International, LLC  
2420 Sweet Home Road, Ste. 150  
Amherst, NY 14228-2244

American Express  
Box 0001  
Los Angeles, CA 90096-8000

Anesthesia Service Medical Group  
Box 85004  
San Diego, CA 92186-5004

Bank of America  
Box 17054  
Wilmington, DE 19850

Bank of America  
Box 17054  
Wilmington, DE 19850

Bay Imaging Consultants  
c/o FCB  
757 L Street  
Fresno, CA 93721

Best Buy/HSBC  
Box 60148  
City of Industry, CA 91716-0148

Boeing Employees Credit Union  
Box 97050  
Seattle, WA 98124

Boeing Employees Credit Union  
Box 97050  
Seattle, WA 98124

California Business Bureau  
4542 Ruffner St., #160  
San Diego, CA 92111

California Emergency Phys  
c/o SCC  
914 14th St.  
Modesto, CA 95354

Capital Management Services, LP  
726 Exchange Street, #700  
Buffalo, NY 14210

Capital One  
Box 30281  
Salt Lake City, UT 84130

Chase  
Box 15298  
Wilmington, DE 19850

Chex Systems, Inc.  
7805 Hudson Road, Suite 100  
Woodbury, MN 55125

City of San Diego  
1010 2nd Ave., #666  
San Diego, CA 92101

City of San Diego  
1010 2nd Ave., #666  
San Diego, CA 92101

CMRE Financial Services  
3075 E. Imperial Hwy, Suite 200  
Brea, CA 92821

Comcast Cable  
Box 34227  
Seattle, WA 98124-1227

Credit Management  
4200 International Parkway  
Carrollton, TX 75007-1912

Cyrus Torchinsky, MD PhD  
4060 4th Ave, Ste. 410  
San Diego, CA 92103-2121

David M. Kupfer, MD  
5395 Ruffin Rd., #201  
San Diego, CA 92123

Derek Sanders  
770 California St., #401  
San Francisco, CA 94108-2424

Dr, Behzad Aalaei  
444 W. C Street, Ste. 444  
San Diego, CA 92101

Dr. Michael Huguet  
c/o TPS  
Box 1270  
Los Alamitos, CA 90720

Dr. Ryan Curda  
4747 Mission Blvd., Ste. 1  
San Diego, CA 92109

Emergency Services Medical Corp.  
Box 503330  
San Diego, CA 92150-3330

Emergency Services Medical Corp.  
Box 503330  
San Diego, CA 92150-3330

Emergency Services Medical Corp.  
Box 503330  
San Diego, CA 92150-3330

Emily Funk  
5118 W Swayback Pass  
Phoenix, AZ 85310

ER Services Medical Group  
c/o Roadrunner  
Box 9022  
La Jolla, CA 92038

Eric Beasley  
301 Bicentennial Circle  
Sacramento, CA 95826

FMA Alliance  
12339 Cutten Road  
Houston, TX 77066

Grant & Weber  
26575 West Agoura Road  
Calabasas, CA 91302

Grossmont Anesthesia Services  
Box 997  
La Mesa, CA 91944-0997

Healing Arts Wellness Center  
1001 Garnet Ave, #220  
San Diego, CA 92109

HSBC  
Box 3425  
Buffalo, NY 14240

I.C. System, Inc.  
Box 64887  
St. Paul, MN 55164-0887

Internal Revenue Service  
Box 105416  
Atlanta, GA 30348-5416

James Bush, M.D.  
3805 Front Street  
San Diego, CA 92103

Jason & Nichole Cristili  
6703 Camino Del Prado  
Carlsbad, CA 92011

Kay Jewelers  
Box 740425  
Cincinnati, OH 45274-0425

La Jolla Emergency Physicians Medical Gr  
PO Box 66168  
Arcadia, CA 91066-1687

La Jolla Emergency Specialists  
PO Box 660997  
Arcadia, CA 91066-0997

LabCorp  
PO Box 2240  
Burlington, NC 27216-2240

LabCorp  
PO Box 2240  
Burlington, NC 27216-2240

LCA Collections  
PO Box 2240  
Burlington, NC 27216-2240

Lincoln Financial Group  
8801 Indian Hills Drive  
Omaha, NE 68114-4066

Macy's  
Box 8218  
Mason, OH 45040



Mechanics Bank  
c/o SAR  
12209 Champlin Dr., #102  
Champlin, MN 55316

Miur Ortho  
c/o Joben Enterprises  
2405 Shadelands Dr.  
Walnut Creek, CA 94598

Monarch Recovery Management  
10965 Decatur Road  
Philadelphia, PA 19154

Neuroscan  
c/o FCB  
757 L Street  
Fresno, CA 93721

Nordstrom Bank  
Box 13589  
Scottsdale, AZ 82567

Northstar Location Services, LLC  
4285 Genesee St.  
Cheektowaga, NY 14225-1943

Novak Medical Group  
4440 Lamont St.  
San Diego, CA 92109-4560

Ocean Physical Therapy  
4501 Mission Bay Drive, Ste. 3K  
San Diego, CA 92109

Paypal  
2211 N 1st St.  
San Jose, CA 95131

PG E Energy  
c/o CBE Group  
Box 900  
Waterloo, IA 50704

Portfolio Recovery Associates  
120 Corporate Blvd., #100  
Norfolk, VA 23502

Radiology Medical Group  
PO Box 2524  
Indianapolis, IN 46206

Radiology Medical Group, Inc.  
PO Box 2524  
Indianapolis, IN 46206

San Diego District Attorney  
Family Support Division  
330 West Broadway  
San Diego, CA 92101-3825

San Diego Imaging Medical Group  
Box 23540  
San Diego, CA 92193-3540

San Diego Pathologists Medical Group  
Box 744127  
Dallas, TX 75371-4127

Scripps  
10150 Sorrento Valley Road, #200  
San Diego, CA 92121

Scripps  
10150 Sorrento Valley Road, #200  
San Diego, CA 92121

Scripps  
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San Diego, CA 92121

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10150 Sorrento Valley Road, #200  
San Diego, CA 92121

Scripps  
10150 Sorrento Valley Road, #200  
San Diego, CA 92121

Scripps Cardiology Medical Group  
c/o CAS  
323 Van Houten Ave.  
El Cajon, CA 92020

Sharp Memorial Hospital  
7901 Frost Street  
San Diego, CA 92123

Social Security Administration  
Box 2000  
Richmond, CA 94802-1791

Stellar Recovery, Inc.  
1327 Highway 2 West, Suite 100  
Kalispell, MT 59901.

Time Warner Cable  
Box 60074  
Cty of Industry, CA 9171-0074

Toyota Financial Services  
Box 790069  
St. Louis, MO 63179-0069

Toyota Financial Services  
Box 790069  
St. Louis, MO 63179-0069

Uber  
c/o Rasier, LLC,  
182 Howard Street  
San Francisco, CA 94105

US Bank  
Box 790179  
St. Louis, MO 63179-0179

US Bank  
Box 790179  
St. Louis, MO 63179-0179

US Department of Education  
Box 5609  
Greenville, TX 75403

**UNITED STATES BANKRUPTCY COURT  
Southern District of California**

In re Joshua Joel Pratchard & Melissa-Rae Annette  
Pratchard Debtor

Case No. \_\_\_\_\_

Chapter 7

**VERIFICATION OF LIST OF CREDITORS**

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 9 pages, is true, correct and complete to the best of my knowledge.

Date 05/11/2015

Signature  
of Debtor

/s/ Joshua Joel Pratchard

JOSHUA JOEL PRATCHARD

Date 05/11/2015

Signature  
of Joint Debtor

/s/ Melissa-Rae Annette Pratchard

MELISSA-RAE ANNETTE PRATCHARD

B203  
12/94

# United States Bankruptcy Court

## Southern District of California

In re Joshua Joel Pratchard &amp; Melissa-Rae Annette Pratchard

Case No. \_\_\_\_\_

Chapter 7

Debtor(s)

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 1,200Prior to the filing of this statement I have received ..... \$ 1,200Balance Due ..... \$ 0

2. The source of compensation paid to me was:

☒ Debtor
 ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor
 ☒ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

05/11/2015*Date*/s/ Richard E. Chang*Signature of Attorney*Chang and Diamond*Name of law firm*

**Check one box only as directed in this form and in Form 22A-1Supp:**

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 22A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Official Form 22A-1

## 12/14

### Part 1: Calculate Your Current Monthly Income

- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
<p>1. <b>Debtor 1's</b> income</p> <p>2. <b>Debtor 1's</b> expenses</p> <p>3. <b>Debtor 1's</b> net income</p>	<p>4. <b>Debtor 2's</b> income</p> <p>5. <b>Debtor 2's</b> expenses</p> <p>6. <b>Debtor 2's</b> net income</p>

- \$ 0 \$ 0

- \$ 0 \$ 0

Debtor 1 Joshua Joel Pratchard  
First Name Middle Name Last Name


Case number (if known) \_\_\_\_\_

Column A  
Debtor 1Column B  
Debtor 2 or  
non-filing spouse

## 8. Unemployment compensation

\$ 0

\$ 0

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you ..... \$ 0

For your spouse..... \$ 0

## 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$ 0

\$ 0

## 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. food stamps

\$ 357

\$ 0

10b. \_\_\_\_\_

\$ 0

\$ 0

10c. Total amounts from separate pages, if any.

+\$ 0

+\$ 0

## 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 807

+ \$ 0

= \$ 807

Total current monthly  
income**Part 2: Determine Whether the Means Test Applies to You**

## 12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11..... Copy line 11 here → 12a.

\$ 807

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

\$ 9,684

## 13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

California

Fill in the number of people in your household.

1

Fill in the median family income for your state and size of household. .... 13.

\$ 49,983

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

## 14. How do the lines compare?

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 22A-2.* Go to Part 3 and fill out Form 22A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Joshua Joel Pratchard

Signature of Debtor 1

Date 05/11/2015  
MM / DD / YYYY

X /s/ Melissa-Rae Annette Pratchard

Signature of Debtor 2

Date 05/11/2015  
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A-2 and file it with this form.



Debtor 1 Joshua Joel Pratchard  
First Name Middle Name Last Name

Case Number (if known) \_\_\_\_\_

**Form 22 Continuation Sheet****Monthly Income**

<b>Month 1</b>			<b>Month 2</b>		
Gross wages, salary, tips...	2,700	0	Gross wages, salary, tips...	0	0
Income from business...	0	0	Income from business...	0	0
Rents and real property income...	0	0	Rents and real property income...	0	0
Interest, dividends...	0	0	Interest, dividends...	0	0
Pension, retirement...	0	0	Pension, retirement...	0	0
Contributions to HH Exp...	0	0	Contributions to HH Exp...	0	0
Unemployment...	0	0	Unemployment...	0	0
Other Income...	357	0	Other Income...	357	0
<b>Month 3</b>			<b>Month 4</b>		
Gross wages, salary, tips...	0	0	Gross wages, salary, tips...	0	0
Income from business...	0	0	Income from business...	0	0
Rents and real property income...	0	0	Rents and real property income...	0	0
Interest, dividends...	0	0	Interest, dividends...	0	0
Pension, retirement...	0	0	Pension, retirement...	0	0
Contributions to HH Exp...	0	0	Contributions to HH Exp...	0	0
Unemployment...	0	0	Unemployment...	0	0
Other Income...	357	0	Other Income...	357	0
<b>Month 5</b>			<b>Month 6</b>		
Gross wages, salary, tips...	0	0	Gross wages, salary, tips...	0	0
Income from business...	0	0	Income from business...	0	0
Rents and real property income...	0	0	Rents and real property income...	0	0
Interest, dividends...	0	0	Interest, dividends...	0	0
Pension, retirement...	0	0	Pension, retirement...	0	0
Contributions to HH Exp...	0	0	Contributions to HH Exp...	0	0
Unemployment...	0	0	Unemployment...	0	0
Other Income...	357	0	Other Income...	357	0

**Additional Items as Designated, if any****Remarks**